

MiScorecard Performance Summary

Department Name: MDCH
Executive/Director: Jim Haveman
Period: 10/1/2012 (September Data)

Legend:
Green 90% or greater of target
Yellow >=75% to <90% of target
Red less than 75% of target

	Metric	Status	Trend	Target	Current	Previous	Frequency	Metric Definition/Goal
Health Outcomes								
3a	Implementation of the Michigan Health and Wellness 4 x 4 Plan in five communities	-	➡	5	New	New	Monthly	Establish five local coalitions to undertake media campaigns and implement two robust initiatives targeted at reducing obesity.
3b	The Percent of MCIR Records that include BMI	-	➡	5%	New	New	Monthly	Utilize the Michigan Care Improvement Registry (MCIR) to collect data on individual Body Mass Index (BMI).
3c	The number of hospitals that adopt an OB hard stop policy		⬆	10	43	18	Monthly	Reduce the number of hospitals performing elective deliveries at less than 39 weeks, unless for the safety of the mother or child.
1a	The number of children being served by Healthy Kids Dental		⬆	350,000	439,869	346,343	Monthly	Increase the total number of Medicaid children receiving dental services through expansion into additional counties.
2a	The number of children with autistic disorder diagnosis receiving services	-	-	-	-	-	-	Increase the total number of children, with autistic disorder diagnosis, who receive treatment for autism.
	0-6 years of age		⬆	750	745	753	Quarterly	
	7-17 years of age		⬆	2,750	2,746	2,731	Quarterly	
	The adoption of electronic health records (EHR)		⬆	100	104	77	Monthly	Increase the number of healthcare professionals that adopt EHR through the EHR Incentive Program.
Delivery of Care								
5a	Primary care provider participation		⬆	19,000	18,216	18,167	Monthly	Increase the number of primary care doctors that accept Medicaid patients.
	The number of individuals identified with Alzheimer's/Dementia through option counseling pilot program	-	➡	45	New	New	Monthly	Increase number of people identified with Alzheimer's/dementia through the options counseling pilot program ,which allow for individuals to get supportive services earlier.
4b	The number of transitions from nursing homes to the MI Choice Home & Community Based Waiver		⬆	100	90	88	Monthly	Increase the number of transitions from nursing homes to the MI Choice Home & Community Based Waiver.
	The number of persons with mental illness or substance abuse diagnoses diverted from jail /criminal justice system		➡	30%	27%	27%	Quarterly	Increase the percentage of persons with mental illness/substance abuse and in criminal justice system being diverted from jail or successfully closed from criminal justice system
Customer Service								
	Medicaid claims processed on a timely basis		⬇	95	98.1	98.5	Monthly	Increase the percent of Medicaid claims processed timely - within 30 days.
	Fee For Service (FFS) call center (medical service provider) hold time		⬆	3	9	6	Monthly	Decrease the the average number of minutes FFS provider callers are on hold (lower number is positive).
4a	The MI Choice Home and Community Based Waiver waiting list		⬆	70	150	63	Monthly	Increase the number of people moved from the waiting list, to the MI Choice Home and Community Based Waiver.
	Create coordinated statewide access to aging and disability services through Aging and Disability Resource Center (ADRC) partnerships		⬆	5	27	17	Monthly	Increase access to statewide information and assistance through a 'one stop' approach including statewide resource database, geo-routed 1-800 number and number of counties included in ADRC partnerships.
Organizational Efficiency								
	The number of Women, Infants and Children (WIC) accounting audits		⬇	2	2	4	Monthly	Increase the number of WIC audits to meet federal regulation.
	The number of electronic records for mental health patients		➡	86%	96%	96%	Annual	Increase the number of CMH service programs utilizing nationally certified electronic health records for all consumers to 40 of 46 CMHS in first year
6a	Savings through cost avoidance measures		⬇	\$5,000,000	\$8,311,723	\$8,759,013	Monthly	Increase savings through cost avoidance measures to Medicaid providers.
6b	The number of Medicaid fraud referrals to the Office of the Attorney General		➡	3	3	3	Monthly	Increase the number of Medicaid fraud referrals to the Office of the Attorney General to recover monies.